

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10637600 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3	2					
4	2					
5	2					
6	8					
7	2					
8	1					
9	2					
10	1					
11	1					
12	1					
13	1					
14	1					
15	2					
16	3					
17	2					
18	3					
19	2					
20	3					
21	2					
22	3					
23	3					
24	2					
25	1					
26						
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44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	5					
TOTAL DEP.	549					
TOTAL CLAIMS	57					

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
55						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						